



# Landline Phone Form

Fill out the required information below. This is a one-time program, with a limit of one landline phone per household. We will not supply the landline.

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**Date** \_\_\_\_\_

**Tribal ID #** \_\_\_\_\_

**Applicant Name** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

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**With my signature below, I hereby certify and attest that all information and documentation provided is true and accurate.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Printed Name

## Native Village of Barrow use Only

**Person Receiving Application** \_\_\_\_\_ **Approved By** \_\_\_\_\_ **Date** \_\_\_\_\_

**Budget category** \_\_\_\_\_